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CONFIRMATION NO. 2185

Bib Data Sheet

SERIAL NUMBER 10/762,218	FILING OR 371(c) DATE 01/21/2004 RULE	CLASS 715	GROUP ART UNIT 2109	ATTORNEY DOCKET NO. 14618-007001
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APPLICANTS

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**** CONTINUING DATA *******

none KTD

**** FOREIGN APPLICATIONS *******

none KTD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ******** 04/24/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 6	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions. <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged <i>Muthuk</i> Examiner's Signature	KTD Initials			

ADDRESS

60380

TITLE

Event scheduling

FILING FEE RECEIVED 738	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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